

Hope for patients with type 2 diabetes

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The outlook for individuals with type 2 diabetes and coronary artery disease is not as grim as originally believed, according to new Saint Louis University research published in *Circulation, the Journal of the American Heart Association*.

"Our research found that people with [type 2 diabetes](#) and [heart disease](#) have a more favorable prognosis with proper medical care and management of risk factors, including cholesterol, blood pressure, high blood sugar levels and smoking than previously thought," said Bernard R. Chaitman, M.D., professor of medicine and cardiologist at Saint Louis University School of Medicine and a lead investigator of the study.

"This goes against common beliefs among many physicians that these patients die most commonly of cardiac causes and gives us a lot of hope."

The goal of the Bypass Angioplasty Revascularization Investigation 2 Diabetes (BARI 2D) trial was to examine how deadly heart disease is in individuals with type 2 diabetes and to identify the best treatment options for these patients, including whether artery revascularization via an [angioplasty procedure](#) or bypass surgery is necessary.

In total, 2,368 study participants were followed for five years. All study participants received the treatment recommended by their physician, as well as intensive medical therapy, including medication for cholesterol, blood pressure, diabetes, and lifestyle changes such as weight management and smoking cessation counseling.

The research found that individuals with mild to moderate coronary heart disease, who were treated with intensive medical therapy alone, were no more likely to die from a heart problem after five years than those who also had an angioplasty procedure, which clears artery blockage by inserting a balloon in the artery and then inflating it. After five years, 4 to 5 percent of these patients died from a heart attack or related heart disease.

For individuals with more extensive heart disease, however, coronary bypass surgery, in addition to intensive medical therapy, significantly decreased the risk of heart attacks and cardiac-related deaths. Sixteen percent of patients who received bypass surgery either died or had a heart attack within five years compared to 22 percent of patients who received intensive [medical therapy](#) alone.

According to Chaitman, individuals with more severe and extensive coronary blockage are more likely to experience a heart attack without prompt [bypass surgery](#). Heart attacks increase the risk of death five to eight times more than in individuals without a heart attack .

"Our primary goal always is to prevent heart attacks from occurring; however, our research found that angioplasty is not always necessary in preventing a [heart attack](#) or cardiac-related death just because a blocked artery is present. Patients with type 2 diabetes and heart disease need to have a frank discussion with their doctors about their treatment options and what's best for their individual case," Chaitman said.

Source: Saint Louis University

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